

1.) CORPORATION NAME:

FLATTOP MOUNTAIN LANDOWNERS ASSOCIATION, INC.

DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**RODERICK D. HARVEY
8 YARMOUTH CIRCLE
NEWPORT NEWS, VA 23602**

SCC ID NO: **01495803**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

NEWPORT NEWS CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8 YARMOUTH CIRCLE

CITY/ST/ZIP: NEWPORT NEWS, VA 23602

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: STEVE KNEIPP TITLE: PRESIDENT ADDRESS: 540 JONQUIL ROAD CITY/ST/ZIP/CO: RUCKERSVILLE, VA 22968	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: RODERICK D. HARVEY TITLE: ASST TREASURER ADDRESS: 8 YARMOUTH CIR. CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23602	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEITH GARDINER TITLE: DIRECTOR ADDRESS: 3313 HEMLOCK DR CITY/ST/ZIP/CO: FALLS CHURCH, VA 22042	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Dean Wilder TITLE: VICE PRESIDENT ADDRESS: 332 Woodcock Way CITY/ST/ZIP/CO: Free Union, VA 22940	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Marty Ellington TITLE: DIRECTOR ADDRESS: 971 Flattop Mt Road CITY/ST/ZIP/CO: Free Union, VA 22940	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: David Hogg TITLE: DIRECTOR ADDRESS: 270 Ipswich Place CITY/ST/ZIP/CO: Charlottesville, VA 22901	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: Cheryl Mayer TITLE: DIRECTOR ADDRESS: 410 North West St CITY/ST/ZIP/CO: Culpeper, VA 22701	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: John Reynolds TITLE: DIRECTOR ADDRESS: 3812 South Blue Ridge CITY/ST/ZIP/CO: Rochelle, VA 22738	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Marlo Meuli TITLE: SECRETARY ADDRESS: 921 Hanover St CITY/ST/ZIP/CO: Fredericksburg, VA 22401	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Noel Wright TITLE: DIRECTOR ADDRESS: 7527 Beulah St CITY/ST/ZIP/CO: Alexandria, VA 22315	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ RODERICK D. HARVEY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	RODERICK D. HARVEY, ASST TREASURER PRINTED NAME AND CORPORATE TITLE	12/22/2012 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		